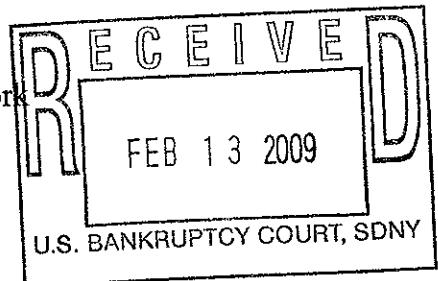


Honorable Robert D. Drain
United States Bankruptcy Court for the Southern District of New York
Debtors: Delphi Corp.
Case Number: 05-44481

Feb. 7th, 2009



Dear Sir,

On February 5th, 2009 I received a letter stating that Delphi Corp. filed a motion with the U.S. Bankruptcy Court to discontinue the salaried retiree's healthcare and life insurance coverage. In the filing, per the letter, it also stated that our Retiree Health Reimbursement Account (RHRA) would also be discontinued. This \$20,000 account was established to reimburse the cost of Medicare Supplemental Health and Dental insurance for our family when I turned 65 years of age and became Medicare eligible.

A company selected by Delphi called Wage Works administered this plan. When you sign on to review your submissions and remaining account balance at this company's web site, it is clearly stated that the funds do not have an expire date and that you can submit claims monthly as the expenses are incurred (see Wage Works letter dated December 12, 2007 attached: PE-207-HRA-WELLTR-DEPHI). In the letter we received and in all communications, there was the statement that the account was "established". I do not recall seeing any communication that the account could be terminated by Delphi at any time, and there is a Wage Works statement that says there is no expire date on the account prominently displayed with the account balance.

Taking all I was told about the account into consideration, I tried to make it last as long as possible, choosing only the most cost effective insurance that I could find. If this motion is approved I will loose over \$13,000 in health benefits due to this deception accepted from Delphi in good faith.

Therefore, I am contesting the part of the motion by Delphi to terminate all existing Retiree Health Reimbursement Accounts. I understand the extraordinary economic times that the company, as well as the automotive industry faces, but I also believe that this country is ruled by laws that are based on what is fair, and that deception should not be rewarded.

Sincerely,

A handwritten signature in black ink, appearing to read "Ronald W. Cox".

Ronald W. Cox
9610 Oakhaven CT
Indianapolis IN 46256



December 12, 2007

Dear Delphi Salaried Retiree or Surviving Spouse:

Welcome to your Delphi Retiree Health Reimbursement Account (HRA). Now that Delphi has automatically enrolled you in a \$10,000 HRA (or \$20,000 if you retired on or before March 1, 2005), you can start using it to reimburse yourself for the cost of health insurance plan premiums or other required contributions. This letter contains important information about your account and how to manage the reimbursement process.

What Is Covered

The Delphi Salaried Retiree HRA is intended to assist you with the transition to Medicare coverage and is limited to the reimbursement of eligible health care premiums or contributions. Examples of medical insurance premiums that are eligible for reimbursement include:

- Medicare Part B premiums;
- Medicare Prescription Drug Plan premiums – Part D;
- Medicare Advantage premiums;
- Medigap premiums – such as AARP supplemental coverage through UHC;
- Dental insurance premiums, including the cost of continuing coverage through Delphi;
- Vision insurance premiums, including the cost of continuing coverage through Delphi;
- Extended care coverage premiums, including the cost of continuing coverage through Delphi;
- Required post-tax contributions/premiums to be a dependent on your spouse's employer-based health care coverage; and
- Required post-tax health care contributions for your dependents who continue to be eligible for Delphi health care coverage.

What Is Not Covered

- Out-of-pocket expenses for actual medical, dental, or vision services and supplies;
- Health care premiums or contributions paid on a pre-tax basis through payroll deduction;
- Premiums for long term care insurance; and
- Membership fees for discount cards or other similar programs.

Who Is Covered by the HRA

You and any eligible dependents as defined by the Internal Revenue Code of the United States. For more information about eligible dependents go to www.irs.gov.

How Your HRA Works

Your Delphi HRA was established to help with the expenses associated with purchasing health care insurance coverage. By law, reimbursement can only take place after an expense has been incurred. That means you cannot use the account to pre-pay for future expenses or receive reimbursement for a premium period that has not yet begun. If you are paying the premium on a quarterly basis, you cannot receive full reimbursement until the last month in the quarter. You can, however, be reimbursed on a month to month basis by filing a claim each month using your quarterly payment information.

How to Make a Claim

The rules that govern HRA's require that documentation of the expense – referred to as a "Proof of Expense" – be provided in order to be reimbursed. Claims may be made as often

as you like. A claim normally consists of a claim form and Proof of Expense. Examples of Proof of Expense for paid premiums and/or contributions include: bank statements; copies of cancelled checks; statements from Medicare/Social Security; an insurance provider's invoice for the coverage period; and pay stubs from your employer or Social Security or your pension plan that show contributions or premium deductions for health care.

The process for making a claim is generally as follows:

1. You pay for an eligible health care premium or contribution.
2. Complete a "Pay Me Back" claim form -- available from the website (www.wageworks.com) or by calling customer service at (877) 924-3967 (877-WageWorks).
3. Mail or fax the claim form to WageWorks with documentation of the payment of the expense.

Please complete the "other" field as the expense type for all premiums and write "medical premium" or the premium type in the field provided. The Rx, medical, dental or vision fields should not be used; only the "other" field should be used when completing a claim for premium expenses.

In the service start date field please indicate the month of the premium expense that you are claiming, not the payment date. Please enter the beginning date of the month that indicates the month of the premium coverage such as 01/01/2007. These steps will ensure timely processing of your claims.

Claims that provide the necessary Proof of Expense will normally be processed within three weeks. Your reimbursement check can be mailed to you, or if you prefer you can use the website to elect to have the funds deposited directly in a bank account that you designate.

Accessing Your Account Online

To log on to the WageWorks website to view all of your account information, including account activity and claims status, complete the simple registration process.

1. Go to www.wageworks.com and click on "First-Time User? Register Now."
2. Enter the information requested so we can identify you.
3. Confirm or update the contact information in your Profile.
4. Review the User Agreement and confirm your acceptance.
5. Click the Health Care tab to access account information

Accessing Your Account by Phone

You may call us at (877) 924-3967 (877-WageWorks). Our automated voice response system can assist you around the clock. Customer service representatives are available during normal business hours 8 a.m. to 8 p.m. eastern.

Monthly Statements

You will receive monthly statements by email or mail detailing your account information. Watch for your first statement following the month after you have enrolled.

Information or Assistance

If you need more information or assistance while using your Delphi Retiree Health Reimbursement Account, browse our website at www.wageworks.com, send an email to help@wageworks.com, or call us at (877) 924-3967 (877-WageWorks). Our customer service representatives are here to assist you.

Sincerely,

WageWorks